

SAMPLE APPROVED PROTOCOLS

EMERGENCY MEDICAL CARE OF SEVERE ALLERGIC REACTIONS (FOR AMBULANCE PROVIDERS WITH AN APPROVED EPINEPHRINE PLAN)

PROVIDER NAME: _____ PROVIDER NO. 60_____

This protocol may be used by properly trained and licensed EMTs who are certified in the treatment of anaphylactic shock. EMTs-basic must obtain a direct voice order from the medical control physician in all cases **prior** to administration of epinephrine.

- I. PATIENT PRESCRIBED EPINEPHRINE AUTO-INJECTOR - Patient has come in contact with substance that caused past severe allergic reaction and complains of respiratory distress and/or exhibits signs and symptoms of shock (hypoperfusion):
 - A. Perform initial assessment
 - B. Obtain patient history and perform physical exam
 - 1. History of allergies?
 - 2. What was patient exposed to and how exposed?
 - 3. Effects and progression?
 - 4. Interventions (previous injection?)
 - C. Assess baseline vital signs and SAMPLE history
 - D. Administer oxygen (if not already done during initial assessment)
 - E. Determine if patient has prescribed preloaded epinephrine auto-injector available
 - F. Contact medical control for authorization to assist with administration of patient's medication - report findings including any possible contraindications
 - G. Obtain voice authorization for injection, including dosage; repeat order back to physician
 - H. Verify patient's own medication, medication has not expired, is clear and not discolored
 - I. Describe procedure to patient and obtain consent (if possible)
 - J. If authorization granted, facilitate administration of medication and dispose of injector properly, or;

If authorization not granted, continue with assessment, care and transport

- K. Record actions and reassess patient in two minutes
 - L. Transport immediately
 - M. Dose may be repeated in 20 minutes (10 minutes if conditions appear to be life-threatening) with physician authorization
- II. AMBULANCE SERVICE' EPINEPHRINE AUTO-INJECTOR - Patient exhibiting signs of severe allergic reaction and complains of respiratory distress or exhibits signs and symptoms of shock (hypoperfusion):
 - A. Perform initial assessment
 - B. Obtain patient history and perform physical exam
 - 1. History of allergies?

2. What was patient exposed to and how exposed?
 3. Effects and progression?
 4. Interventions (previous injection)?
- C. Assess baseline vital signs and SAMPLE history
 - D. Administer oxygen (if not already done during initial assessment)
 - E. Contact medical control - report assessment findings including any contraindications - specifically request implementation of epinephrine protocol
 - F. Obtain voice authorization for injection, including dosage; repeat order back to physician
 - G. If epinephrine protocol approved, verify medication is correct dosage, is clear and not discolored, or;

If epinephrine protocol not granted, continue assessment, care and transport

- H. Describe procedure to patient and obtain consent if possible
 - I. Administer epinephrine and dispose of injector properly
 - J. Record actions and reassess patient in two minutes
 - K. Transport immediately; continue to reassess and monitor patient
 - L. Dose may be repeated in 20 minutes (10 minutes if conditions appear to be life-threatening) with physician authorization
- III. Patient has contact with substance that causes allergic reactions **without** signs of respiratory distress or shock (hypoperfusion):
- A. Continue with focused assessment
 - B. A patient not wheezing and/or without signs of respiratory compromise or hypotension **should not** receive epinephrine
 - C. Transport, perform ongoing assessment and record actions
 - D. Report any changes to medical control
- IV. Dosage
- Adults: (>60 pounds) 0.3 mg epinephrine 1:1000 IM (one Epipen Adult)
- Children: (<60 pounds) 0.15 mg epinephrine 1:2000 IM (one Epipen Junior)

Approved by: _____

Medical Director (Print)

Medical Director (Signature)

Date